

SAFETY INSPECTION

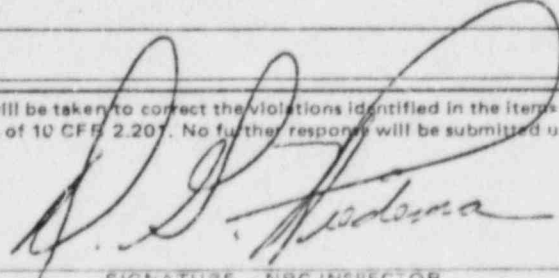
1. LICENSEE CITY OF OSHKOSH WASTE WATER TREATMENT PLANT ATTN: MR. TOM CONRAD 233 CAMPBELL RD. OSHKOSH, WI 54901		2. REGIONAL OFFICE U.S. NUCLEAR REGULATORY COMMISSION REGION III 799 ROOSEVELT ROAD GLEN ELLYN, IL 60137	
3. DOCKET NUMBER(S) 99990003	4. LICENSE NUMBER(S) GENERAL	5. DATE OF INSPECTION 08/29/84	

Licensee:

The inspection was an examination of the activities conducted under your license as they relate to radiation safety and to compliance with the Nuclear Regulatory Commission's (NRC) rules and regulations and the conditions of your license. The inspection consisted of selective examinations of procedures and representative records, interviews, with personnel, and observations by the inspector. The findings as a result of this inspection are as follows:

- ☐ 1. Within the scope of this inspection, no violations were observed.
- ☐ 2. The inspector also verified the steps you have taken to correct the violations identified during the last inspection. We have no further questions on those actions at this time.
- ☒ 3. During this inspection certain of your activities, as checked below, were in violation of NRC requirements.  
THIS IS A NOTICE OF VIOLATION which is required to be posted in accordance with 10 CFR 19.11.
- ☐ A. \_\_\_\_\_ was not properly posted to indicate the presence of a \_\_\_\_\_ 10 CFR 20.203(b), (c), (d), (e) or 34.42.
- ☐ B. Containers located in \_\_\_\_\_ were not properly labeled to indicate the presence of radioactive material. 10 CFR 20.203(f)(1), or (f)(2).
- ☒ C. leak tests \_\_\_\_\_ of sealed sources were not performed at the proper frequencies. 10 CFR 31.5(c)(2) License Condition Number \_\_\_\_\_.
- ☐ D. Records of \_\_\_\_\_ were not properly maintained. 10 CFR \_\_\_\_\_ or License Condition Number \_\_\_\_\_.
- ☐ E. Documents were not properly posted or otherwise made available. 10 CFR 19.11.
- ☐ F. Reports or notifications of \_\_\_\_\_ were not made in accordance with 10 CFR \_\_\_\_\_ or License Condition Number \_\_\_\_\_.
- ☒ H. Tests for the proper operation of the on-off mechanism and indicator were not performed at the specified intervals. 10CFR 31.5(c)(2)
- ☐ I. \_\_\_\_\_
- ☐ J. \_\_\_\_\_
- ☐ K. 8409170342 840913  
IE QA999 ELOOSH  
99990003 PDR

I hereby state that within 30 days the actions described by me to the Inspector will be taken to correct the violations identified in the items checked above. This statement of corrective actions is made in accordance with the requirements of 10 CFR 2.201. No further response will be submitted unless required by the NRC.

SIGNATURE - LICENSEE	DATE	SIGNATURE - NRC INSPECTOR	DATE
			8/14/84

ORIGINAL TO LICENSEE

GENERAL LICENSE GAUGE DATA COLLECTION FORM

1. Name and Address of General Licensee:

City of Oshkosh

Superintendent of Utilities:

Waste Water Treatment Plant

Tom Conrad

233 Campbell Road

Oshkosh, WI 54901

(414) 236-5170

2. Principal Business of Licensee:

Waste water treatment

3. Purpose for which Gauge(s) are used (e.g., Measurement of Level, Density, Flow, Thickness, etc.):

Measurement of sludge density.

4. Gauge Specifics: Two gauges as specified below:

a. Manufacturer - Ohmart

b. Model No. ED-8/ED-12

c. Isotope/Activity - cesium-137, 1000 millicuries/ cesium-137, 2000  
millicuries

- d. Date Received - December 1973 Installed about November 5, 1975
- e. Date Replaced - N/A

5. Name of Specific Licensee that installed Gauge:

Ohmart

6. Does the Gauge have a Durable, Legible and Visible Label:

Yes, warning, source ID, and general license label are intact.

7. Was an Initial Radiation Survey performed at time of installation and do they have a Record (List Results) NOTE: Records only required for 2 year period:

Yes, records from Ohmart indicate that a survey was conducted during installation.

8. Leak Tests:

a. Have the Tests been performed (List Results):

Yes, tests indicate less than 0.005 microcuries.

b. Name of Firm/Person conducting Test:

Ohmart

- c. Are Records available of Tests (List Date of Last Test):

NOTE: Records only Maintained for 2 years

Last leak test on November 13, 1975 at time of installation, no tests were made after that date.

9. Operational Test of Gauge:

- a. Have any Tests been performed of the on/off mechanism:

Tests were probably performed at time of installation but records cannot be found. Tests have not been performed since installation.

- b. Name of Firm/Person who performed Test:

Ohmart

- c. Are Records maintained of Tests (List Dates):

N/A

10. Has the Gauge been moved from it's Original Location? If so, by Whom:

No

11. Does the Licensee have personnel who are responsible for assuring compliance with the General License Conditions (10 CFR 31, 31.5(c) (1 through 10):

Yes, Mr. Tom Conrad

12. Has the Licensee made any transfers of gauges:

No

13. Name and Address of Gauge Manufacturer:

Ohmart Corp.

4241 Allendorf Drive

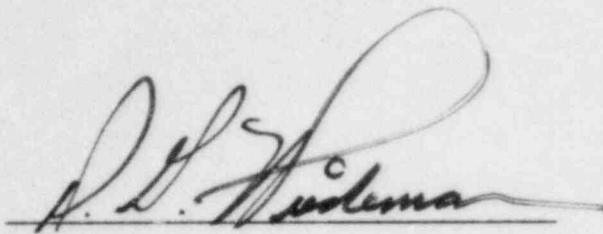
Cincinnati, OH 45209

(513) 272-0131

14. Onsite Inspection of Gauge(s) (list Observations/Measurements):

N/A

15. Signature and Date of NRC Reviewer

A handwritten signature in dark ink, appearing to read "D. G. Wiedeman", is written over a horizontal line.

D. G. Wiedeman, Chief

Nuclear Materials Safety

Section 1

9-11-84

Date